

Fresno State Students,

If you are planning to join TRIO Student Support Services Program for the 2018-2019 academic year, we will need the following documents to determine your eligibility. These documents will need to be submitted and reviewed prior to the start of the Fall 2018 or Spring 2019 SSSP orientations. An applicant must have the following items completed and submitted before they are assigned an orientation date and time:

- * A completed TRIO Student Support Services' application all information must be accurately filled in.
- * Personal Statement question answered and submitted along with completed application.
- * Submit a copy of 2017 or 2018 tax records or public benefits award letter. If you did not submit your tax return for 2017 or 2018, you must complete a self-reporting form.

Note: Fresno State's Dog Days Orientation does not account for SSSP's orientation.

All required documentation will need to be submitted ASAP in order to be considered for Fall 2018 or Spring 2019. You can submit your completed application with the required supporting documents via email at kmaravilla@mail.fresnostate.edu or in person at the TRIO Program Office located at Lab School, Room 9. If you have any questions, please call (559) 278-5725.

Eluterio L. Escamilla
TRIO SSSP Director



TRIO Student Support Services Program

STUDENT SUPPORT SERVICES PROGRAM (SSSP) APPLICATION

Established in 1979, the mission of TRIO Student Support Services Program (SSSP) is to provide eligible students with a range of services including support and encouragement, academic and financial guidance, mentoring, individual tutoring services, math and science instruction, reading and writing instruction, accessible tutoring rooms, and graduate school planning.

Students participate in TRIO SSSP throughout their enrollment at California State University, Fresno.

1. Program Eligibility

Participants must be enrolled or accepted for enrollment at Fresno State, be a U.S. citizen or permanent resident, be pursuing your first bachelor's degree, and have at least **one** of the following federally defined criteria apply to you:

- **First generation college student** (neither parent nor guardian has received a four year (BACHELOR'S) degree);
- **Income eligible** (taxable household income is at or below federally determined guidelines). See chart below.
- Student with a documented **disability** (as defined by the American with Disabilities Act (ADA) and verified by NDSU's Disability Services).

Size of Family Unit	48 Contiguous States, D.C., and Outlying Jurisdictions	Alaska	Hawaii
1	\$18,210	\$22,770	\$20,940
2	\$24,690	\$30,870	\$28,395
3	\$31,170	\$38,970	\$35,850
4	\$37,650	\$47,070	\$43,305
5	\$44,130	\$55,170	\$50,760
6	\$50,610	\$63,270	\$58,215
7	\$57,090	\$71,370	\$65,670
8	\$63,570	\$79,470	\$73,125

DID NOT FILE TAXES IN CURRENT YEAR

TRIO OFFICE USE ONLY	
RECEIVED BY	_____
DATE RECEIVED	_____
REVIEWED BY	_____
<input type="checkbox"/> ACCEPTED	<input type="checkbox"/> FIRST GEN <input type="checkbox"/> INCOME <input type="checkbox"/> DISABILITY
<input type="checkbox"/> WAITLISTED	
<input type="checkbox"/> NOT ACCEPTED	

2. Selection Process

When there is limited space in the TRIO SSSP program, priority will be given to:

- Students who are both first generation college students and income eligible.
- Students who are both students with disabilities and income eligible.
- Alumni of other TRIO programs or other pre-college programs: Upward Bound, Veteran Upward Bound, Talent Search, Educational Opportunity Center, McNair Scholars Program, other Student Support Services program, AVID or College Possible.
- Students who are motivated to take full advantage of services offered through TRIO SSSP.
- Students planning to continue their enrollment in a graduate or professional program.

3. **Only complete applications will be considered for services. You are required to further provide the following information.**

- An SSSP Student Application.
- Most recent Federal Income Tax Return (1040, 1040A, 1040 EZ)—first two pages only. If you identify as an **independent** student (i.e. 24 years of age or older, married, have legal dependents, homeless youth, foster care youth, or serve in the military) bring your most current return; however, if you identify as a **dependent** (i.e. you are claimed by your parent or guardian, bring your parent's most current return.)
- If you identify as a student with a disability, please include referral letter from Disability Services with your application.
- Social Security Number
- Date of Birth
- Gender
- Ethnicity

**Please return complete
Application to:
TRIO Student Support Services Program
5048 N Jackson Ave M/S LS74
Fresno, CA 93740
Phone: 559.278.5725 Fax: 559.278.1441
ssspv@mail.fresnostate.edu**

TRIO STUDENT SUPPORT SERVICES PROGRAM (SSSP)

STUDENT APPLICATION

First Name:		Middle Initial:	Last Name:			
Current Address:		City:	State:	ZIP Code:		
Cell Phone:	Home Phone:		Fresno State Student ID#:			
Have you previously participated in Upward Bound, Veteran Bound, SSS, McNair Scholars Program or a pre-college program (i.e. AVID, College Possible)? Yes No If yes, please specify:			Social Security Number:			
Ethnicity:	Date of Birth:	Gender:	Veteran: Yes No Branch of Service:			
Fresno State Email:						
Permanent Address:		City:	State:	ZIP Code:		
Are you currently enrolled or accepted for enrollment at CSUF <u>and</u> pursuing your first Bachelor's degree?					Y	N
Have you completed a Learning and Study Strategies Inventory (LASSI)? If you answered no, you will be asked to take this inventory prior to your first meeting with an SSS advisor.					Y	N
Are you a permanent resident, or refugee of the United States? If so, please provide INS# _____.					Y	N
If not, are you are in the process of becoming a permanent resident or citizen?					Y	N
Have either of your parents/legal guardians graduated with a <u>four-year degree</u> ?					Y	N
Do you identify as a student with a disability (i.e. physical, learning, or other)?					Y	N
Have you completed a Disability Services application for services?					Y	N
Are you receiving a Pell Grant?					Y	N
Year In College:	1 st yr., never attended	1 st yr., attended before	2 nd yr./sophomore	3 rd yr./junior	Current Cumulative GPA:	
	4 th yr./senior	5 th yr./other undergraduate				

Check all the academic needs that apply to you:

- | | | |
|------------------------|--|--|
| Low high school grades | Need for academic support to raise grade(s) in required course(s)/academic major | |
| Low ACT scores | Out of academic pipeline for 5 or more years | GPA below 2.0 |
| GED | Limited English Proficiency | Lack of academic preparedness for college level work |
| Low college grades | Enrolled in: MATH 98 ASC 087 | Lack of clear career and major goals |

Please indicate how we may be of assistance: (Mark all that apply to you)

- Academic advising/Degree planning
- One-on-one tutoring
- Assistance completing financial aid applications/financial literacy
- Career/major exploration
- Graduate/Professional school planning and information
- Individualized personal, academic and career guidance
- Mentoring program (peer, graduate school mentors, faculty and community mentors)

Please explain your reasons for applying to the SSSP program, including what challenges, if any, may prevent your success at Fresno State:

Privacy Act Information

In accordance with the Privacy Act of 1974 (Public Law No. 93-579, 5 U.S.C. 552a), you are hereby notified that the Department of Education is authorized to collect information to implement the Student Support Services Program under Title IV of the Higher Education Act of 1965, as amended (Pub. Law 102-325, Sec. 402D). In accordance with this authority, the Department receives and maintains personal information on participants in the Student Support Services Program. The principal purpose for collecting this information is to administer the program, including tracking and evaluating participant progress. The information that is collected on this form will be retained in the program files and may be released to other Department officials in the performance of their official duties.

By signing this, I grant permission to Student Support Services Program to track all of my academic progress at Fresno State. I hereby authorize the release of my student academic and financial aid records for the SSSV professional staff to use to discuss with me and if appropriate my instructor in order to better assess my academic progress. I understand that my instructors may be contacted during the semester to evaluate my class progress. These evaluations will be available to me upon my request. In addition, I hereby give my permission for my photograph, work and/or statements to be used by Student Support Services Veterans for promotional, or publicity purposes. If found eligible for SSSP, I agree to actively participate in the program, and I certify that the information provided by me is correct to the best of my knowledge

Student Signature:

Date: